

| TRANSMITTAL SLIP                                                                          |          | DATE      |
|-------------------------------------------------------------------------------------------|----------|-----------|
| TO: <i>Bob</i>                                                                            |          |           |
| ROOM NO.                                                                                  | BUILDING |           |
| REMARKS:<br><i>Does this mean anything to you</i><br><i>No!</i><br><i>Send 66-GP etc.</i> |          |           |
| FROM: <i>FSA</i>                                                                          |          |           |
| ROOM NO.                                                                                  | BUILDING | EXTENSION |
| FORM NO. 241<br>1 FEB 55                                                                  |          |           |
| REPLACES FORM 3-1<br>WHICH MAY BE USED.                                                   |          |           |